SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

AME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FUND	
HOWAINE SOCIETY EEGISLATIVE FOND	
Full Name (Last, First, Middle Initial) of Payee Share Group	Date
Mailing Address 4411 S 40th Street Suite D-6	Amount
City State Zip Code Phoenix AZ 85040	545.40
Purpose of Expenditure Telemarketing Category/ Type	Office Sought: X House State: MI House Senate Senate 00
Name of Federal Candidate Supported or Opposed by Expenditure: Joseph K Knollenberg	Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought 7013.21	Disbursement For: Primary X General 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Diners Club	Date Date Date Date
Mailing Address P O Box 6935	Amount 162.19
City State Zip Code The Lalces NV 88901	102.13
Purpose of Expenditure Transportation, lodging Category/ Type	Office Sought: X House State: MI House Senate District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: Gary Peters	President Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought 4750.11	Disbursement For: Primary X General 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee Diners Club	Date M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P O Box 6935	Amount
City State Zip Code The Lalces NV 88901	162.19
Purpose of Expenditure Transportation, lodging Category/ Type	Office Sought: X House State: MI House Senate District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: Joseph K Knollenberg	President Support X Oppose
Calendar Year-To-Date Per Election for Office Sought 7013.21	Disbursement For: 2008 Other (specify) Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	869.78
(b) SUBTOTALof Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	